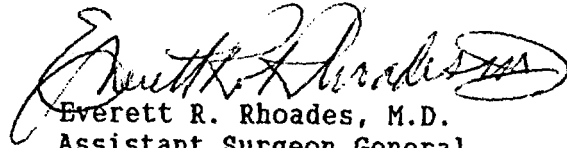


BACKGROUND:

This issuance establishes the Indian Health Manual, Part 5, Chapter 10, "Housekeeping and Linen Services."



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MATERIAL TRANSMITTED:

Indian Health Manual, Part 5, Chapter 10, "Housekeeping and Linen Services," Pages 1 through 14, and Manual Exhibit 5-10-A.
Table of Contents.

MATERIAL SUPERSEDED:

None

MANUAL MAINTENANCE:

Please file Chapter 10, "Housekeeping and Linen Services," in Part 5 behind Chapter 9, "Facilities Management," of the Indian Health Manual.

Log in and file the TN *in* sequence.

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Exhibit 5-10-A "Model Contract Laundry

Descriptions /Specifications/Work Statement"

- 5-10.1 PURPOSE. This issuance establishes the policy, responsibilities, and program elements for the Health Care Facility Housekeeping and Linen Services Program, for all Indian Health Service (IHS) hospitals, health centers, and health stations.
- 5-10.2 POLICY. A functional Health Care Facility Housekeeping and Linen Services Program will be developed and implemented at each IHS facility to provide:
- A. A quality hospital and ambulatory health care facility environment that is safe, sanitary, and aesthetically pleasant for all patients, staff, and visitors;
 - B. Linen services for each health care facility;
 - C. Proper maintenance and protection of the Federal Government's investment in housekeeping equipment and accessories, housekeeping supplies, linens, and other fabrics; and
 - D. Periodic Quality Assurance assessments and evaluations, in accordance with health care facility accreditation and certification standards.
- 5-10.3 STAFF RESPONSIBILITIES.
- A. Director, IHS.
 - (1) Directs: the establishment and implementation of an IHS Health Care Facility Housekeeping and Linen Services Program.
 - (2) Ensures that Area Directors identify resources and provides support for the Health-Care Facility Housekeeping and Linen Services Program at all levels in their respective organizations.
 - (3) Ensures that all contracted housekeeping and laundry programs meet IRS requirements.
 - E. Associate Director, Office of Environmental Health and Engineering.
 - (1) Ensures that professional environmental engineering consultation, in matters relating to the Health Care Facility Housekeeping and Linen Services Program, can be obtained from the Director, Division of Facilities Management (DFM) .

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(S-10.3B continued)

- (2) Ensures that professional environmental health services consultation, in matters of safety and public health significance, can be obtained from the Director, Division of Environmental Health (DEH).

C. Area Director.

- (1) Ensures that Service Unit Directors identify resources and provide administrative and fiscal support for implementation of the Health Care Facility Housekeeping and Linen Services Program.
- (2) Ensures that professional consultation and technical assistance can be obtained from the respective Area facility management and environmental health personnel.
- (3) Appoints an individual, as appropriate, with suitable training and experience as the Area Housekeeping Program Consultant.

D. Area Housekeeping Program Consultant.

- (1) Provides technical assistance and consultation to all Area housekeeping personnel.
- (2) Reviews each Service Unit/Facility housekeeping and linen services program to evaluate compliance with IHS policy, Area procedures, Joint Commission on Accreditation of Healthcare Organizations (JCAHO), and Health Care Financing Administration (HCFA) requirements.
- (3) Assists service units in arranging appropriate training for their housekeeping staff.

(5-10.3 continued)

E. Service Unit Director.

- (1) Establishes a Service Unit Health Care Facility . Housekeeping and Linen Services Program for the IHS hospital and satellite field clinics (health centers and health stations), with adequate staffing and support to perform the program functions.
- (2) Assigns administrative management of the program to the facility Administrative Officer or other designated supervisor .
- (31) Ensures that professional consultation and technical assistance is obtained from the respective service unit facility management and environmental health personnel.

F. Facility Administrative Officer.

- (11) Provides administrative direction, management and support for the Housekeeping Services Department.
- (2) Directly supervises the Executive Housekeeper or Housekeeping Department Supervisor.

G. Executive Housekeeper or Housekeeping Department Supervisor.

- (1) Oversees the daily operation of the Housekeeping Services Department, to include the following responsibilities:
 - a. Supervision of all subordinate housekeeping, linen, and laundry staff.
 - b. Programming all work assignment coverage areas, work-shift schedules, and timekeeping.
 - c. Conducts reviews and evaluations of the work performance of all subordinates on a scheduled basis.
 - d. Determination, planning, coordination, and documentation of in-service and on-the-job training for all subordinate staff.

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(S-10.36 continued)

- (21) Conducts frequent inspection of all housekeeping equipment and accessories (includes applicable linen/laundry services equipment on-site), for preventive maintenance and repair.
- (31) Conducts scheduled inventories of linen stock and housekeeping supplies.
- (4) Develops and implements a comprehensive "Housekeeping Services Policy and Procedural Manual" with provisions for an annual review and revision of the manual according to IHS and accreditation standards.
- (51) Participates in all facility department head meetings and committee functions (i.e., safety, infection control, and quality assurance) to ensure optimal interdepartmental communications.

- 5-10.4 PROGRAM ELEMENTS. Program elements reflect the minimal functions to be performed at all administrative levels. These elements include :
- A. Staffing. Housekeeping and laundry staffing levels and personnel qualifications shall be determined in accordance with existing IHS staffing criteria and Office of Personnel Management (OPM) position classification standards.
 - B. Equipment and Supply Procurement. The Health Care Facility Housekeeping and Linen Services Program is supported through the required procurement of the following:
 - (1) Housekeeping equipment and accessories;
 - (2) Housekeeping supplies; and
 - (3) Linens.
 - C. Laundry Services.
 - (1) On-site laundry services or contracted laundry services shall be provided.
 - (2) On-site and contracted laundry services shall be performed in accordance with the **most** recent Centers for Disease Control (CDC) Guidelines, JCAHO standards, and Joint **Committee** on Healthcare Laundry Guidelines issuances. An example of **model** contract laundry specifications is included in the Manual Exhibit 5-10-A.
 - (3) Quality control procedures shall be identified, implemented, and approved by the Facilities Infection Control **Committee**, where applicable.
 - D. Housekeeping Services. Housekeeping services shall be conducted in accordance with a facility-specific housekeeping policy and procedural manual. This manual shall include at a minimum the following information guidelines:

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(510.4D continued)

- (1) Housekeeping personnel and administrative policies which include:
 - a. Staffing, including organizational chart;
 - b. Housekeeping duty hours and work shifts;
 - c. Dress code and employee conduct;
 - a. Orientation and in-service training;
 - e. Privacy Act;
 - f. Leave policies;
 - Q* Employee Health Program; and
 - h. Quality Assurance guidelines.
- (2) Safety policies which include:
 - a. Requirements of the Federal Hazard Communication Standard, including copies of all required Material Safety Data Sheets (MSDS);
 - b. Electrical safety;
 - c. Fire safety;
 - d. Disaster preparedness;
 - e. Incident and injury#reporting;
 - f. Body mechanics;
 - Q* Equipment safety;
 - h. Waste handling/disposal; and
 - i. Vision safety.

(5-10.4D continued)

- (3) Infection control policies which include:
 - a. Waste handling and disposal;
 - b. Department of Labor/Department of Health and Human Services joint notice entitled, "Protection Against Occupational Exposure to Hepatitis B Virus and Human Immunodeficiency Virus;"
 - c. Gowning and wearing of gloves;
 - d. Handwashing;
 - e. Handling and storage of clean and soiled linen; and
 - f. Housekeeping and linen services role in the facility infection prevention program.
- (4) Housekeeping equipment, accessories, and supply requirements which include:
 - a. Type and use of equipment;
 - b. Equipment care and preventive maintenance;
 - c. Equipment service and repair records; and
 - d. List of essential housekeeping supplies.

NOTE: Any hospital-grade disinfectant-detergent registered by the Environmental Protection Agency may be used for cleaning environmental surfaces. Manufacturer's instructions for use of such products should be followed.

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(5-10.4D continued)

Selection and use of disinfectant-detergent within each IHS health care facility shall be reviewed and approved by the Facilities Infection Control Committee having jurisdiction prior to the use of the product. This review shall include information contained on MSDS sheets and the manufacturer's claims for efficacy.

The use of phenolic disinfectant-detergents in the obstetrics newborn nursery and isolation nursery **must** be closely scrutinized by the safety and infection control **committees**. Improper use has been associated with documented cases of hyperbilirubinemia in newborn infants.

(51) Cleaning techniques and procedures which include:

a. Cleaning of specific items such as:

- (i) Bathtubs, shower stalls, and shower curtains
- (ii) Beds and cribs including bedmaking and crib-making, if applicable
- (iii) Drinking fountain
- (iv) Floors :

- Dry vacuuming
- Damp mopping (double-bucket method)
- Power washing and wet vacuuming
- Stripping floors
- Refinishing floors
- Spray buffing
- Operating room (OR)/Delivery floors
- Carpet spin cleaning
- Carpet spotting and stain removal
- Deep carpet shampooing

- (5-10.4D(S)a continued)

- (vi) Furniture, lockers, television, and ice machines
- (vii) Overhead lights, draperies, and cubicle curtains
- (viii) Refuse containers and ash trays including refuse collection
- (ix) Toilet fixtures, handwashing, and utility sinks
- (x) Windows and mirrors
- (xi) Walls, doors, ceilings, ceiling lights, and vents
- (xii) Window sills and countertops
- b. Housekeeping cleaning priorities in accordance with Section 5-10.4D(6).
- (6) Hospital housekeeping cleaning priorities for IHS health care facilities listed in descending order of importance include:
 - a. Critical Areas. The following areas require specialized and stringent cleaning techniques and procedures:
 - (i) Surgical operating suites
 - (ii) Obstetrical delivery suites
 - (iii) Central sterile supply units
 - (iv) Intensive care units
 - (v) Newborn nurseries and isolation nursery cubicles
 - (vi) Emergency rooms
 - (vii) Inpatient isolation rooms

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(S-10.4D(6) continued)

- b. Semi-Critical Areas. These areas require thorough cleaning by strict techniques and procedures:
 - (i) Direct patient care locations:
 - (a) Inpatient rooms
 - (b) Treatment rooms
 - (c) Outpatient examination and screening rooms
 - (d) Medical laboratories and radiology
 - (e) Dental and optometric suites
 - (f) Physical and occupational therapy suites
 - (ii) Indirect patient care locations:
 - (a) Clean and soiled utility rooms
 - (b) Linen and soiled laundry rooms
 - (c) Pharmacy
 - (d) Morgue and autopsy room
 - (e)** Nursing stations and nutrition kitchens

(5-10.4D(16)b continued) ,

- (iii) Others :
 - (a) Public and staff restrooms
 - (b) Food vending area, and/or canteen
 - (c) Waiting rooms
 - (d) Corridors and alcoves in semi-critical locations
 - (e) Staff locker rooms and lounges
 - If) Hallways, stairwells, and elevators

C. Non-Critical Areas. These areas should receive routine cleaning but do not require the level of cleaning stated above:

- (i) Administrative and program offices
- (ii) Conference and meeting rooms
- (iii) Medical libraries
- (iv)** Storerooms and supply rooms
- (v) Administrative corridors

m : See Section 5-10.4D regarding development and implementation of individual health care facility "Housekeeping Policy and Procedural Manual."

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(51G.4D continued)

- (7) Cleaning frequency requirements which include:

The frequency of cleaning the various IHS health care facility items and areas depends on a number of contributing factors. Such factors include:

- a. The age of the facility;
- b. The interior design and size;
- c. The location of operating room and delivery suites;
- d. The finishes of environmental surfaces;
- e. The staffing level;
- f. The type and adequacy of the housekeeping equipment, materials, and supplies;
- g. The cleaning techniques and procedures employed; and
- h. Cleaning intervals must be adjusted as required for each individual health care facility.

- (8) Linen service requirements which include:

- a. Processing newly purchased linen;
- b. Handling clean linen;*
- c. Linen inventorying and control; and
- d. Soiled linen handling.

- (9) Description of housekeeping work assignments.

(LO) Housekeeping work schedules.

- . (11) Housekeeping work inspection forms.

. (S--10.4D continued)

E. Quality Assurance.

A Quality Assurance Program for housekeeping services shall be implemented in accordance with IHS, accreditation, and certification requirements.

Quality Assurance activities relating to housekeeping services shall include the following:

- (1) Annual review and revision of the health care facility's housekeeping policy and procedural manual.
- (2) Documentation of orientation and in-service training of the housekeeping and laundry personnel.
- (3) Documentation of inspections and implementation of corrections in housekeeping work assignment areas. Worker evaluations shall address such issues as compliance with the procedures contained in the "Healthcare Facilities Housekeeping Manual" including thoroughness, timeliness, personal hygiene and infection control, appropriate use of chemicals, and general safety.

5-10.5

REFERENCES.

- A. "Accreditation Manual for Hospitals." Joint Commission on Accreditation of Healthcare Organizations, 875 North Michigan Avenue, Chicago, Illinois 60611. (latest edition)
- B. "Clinical Center Cleaning Procedural Manual." 1972 DHEW Publication No. (NIH) 72-106. National Institutes of Health, Department of Environmental Sanitation Control, PHS, DHEW, Bethesda, Maryland 168 pp. (or latest edition)
- C. "Infection Control in the Hospital." 1979. American Hospital Association (AHA), Catalog No. 2117 M (Fourth Edition), AHA, 840 North Lake Shore Drive, Chicago, Illinois, 242 pp. (or latest methodology)

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HOUSEKEEPING AND LINEN SERVICES-

(5-10.5 continued)

- D. "Staffing and Resources Standards Reference Manual, October 21, 1986." pp. 47 through 51. Division of Health Services Planning and Operations Research; Office of Planning, Evaluation, and Legislation; Indian Health Service; PHS, DHHS .
- E. "Health Facilities Planning Manual (HFPM)," Section 54, (latest revision). Indian Health Service, PHS, HHS, Rockville, Maryland 20857.
- F. Tanimoto, Richard M. "Housekeeping Policy and Procedural Manual," 1977. Claremore PHS Comprehensive Indian Health Facility, Claremore, Oklahoma, EHSB, OEHS, Oklahoma City Area IHS, PHS, DHEW, 183 pp.
- G. (Monthly Magazine Subscription) "Executive Housekeeper." Official Publication of the National Executive Housekeepers Association. Philadelphia: North American Publishing Company.
- H. "Control of Communicable Diseases in Man." 1985 (Fourteenth Edition) (or latest revision). The American Public Health Association, 1015 Fifteenth Street N.W., Washington, D.C. 20005, 485 pp.
- I. "AORN Standards and Recommended Practices for Perioperative Nursing," May 1978. AORN (Association of Operating Room Nurses, Inc. 1 Journal, Parts I-III.
- J. Garner, Julia S. and Favaro, Martin S. "Guideline for Handwashing and Hospital Environmental Control," 1985, Hospital Infections Program, Center for Infections Diseases, CDC, U.S. Public Health Service, Atlanta, Georgia, 20 pp.
- K. "Guidelines for Healthcare Linen Service" (latest edition). Joint Committee on Healthcare Laundry Guidelines, 10 pp. (Contact: Barry J. Davis, Epidemiological Investigations Branch, CDC, Atlanta, Georgia).

(5-10.5 continued)

- L. "Protection Against Occupational Exposure to Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV)." Joint Advisory Notice, October 19, 1987. Department of Labor and Department of Health and Human Services, 14 pp.
- M. "Certification Reference Text." National Association of Institutional Linen Management, Suite H, 2130 Lexington Road, Richmond, Kentucky 40475
- N. "Hospital Housekeeping Handbook,*' AHA. Catalog Number 2086, AHA, 840 North Lake Shore Drive, Chicago, Illinois (latest edition).

INDIAN HEALTH SERVICE
MODEL CONTRACT ,LAUNDRY
DESCRIPTION/SPECIFICATIONS/WORK STATEMENT

I. INTRODUCTION:

The purpose of this model contract is to establish acceptable levels of performance by contract laundries.

II. SCOPE OF WORK:

- A. Contractor shall be responsible for furnishing hospital laundry services in compliance with the specifications herein. These specifications MUST be reflected in written laundry policies and procedures which shall be posted in appropriate and conspicuous locations at the laundry.

III. RECEIVING/SORTING AREA:

- A. There shall be physical separation between the soiled area (where soiled linen is stored, sorted, weighed, and loaded) and the clean area (where clean linen is conditioned, ironed, and packaged for shipment). Double door pass through washer/extractors or overhead chute loaded washers shall be used to ensure physical separation.
- B. Handwashing facilities shall be present in all toilet rooms, and provided in, or immediately adjacent to the sorting room and the clean linen storage order.
- C. Toilet rooms shall be conveniently available, maintained in a clean condition and in working order.
- D. The walls, floors, sorting bins, and ceilings shall be in good repair and covered with non-absorbent material that is smooth, easily cleanable, and capable of withstanding frequent washing and disinfecting.
- E. The receiving/sorting area shall be under negative pressure in relationship to the rest of the facility. The air pressure differentials must be sufficiently established and maintained to prohibit the migration of airborne contaminants from the soiled laundry sorting area to the clean laundry processing area. The ventilation rate for the receiving/sorting area shall not be less than 10 room volumes of air exchange per hour.

- F. Any doors leading to The receiving/sorting area from the rest of the facility shall be designed to swing toward the negative air pressure, (soiled laundry) side, unless prohibited by local fire safety code. Housekeeping supplies and equipment for the cleaning of the receiving/sorting area and remaining portion of the facility shall be physically separate. Separate ventilation systems are required for the clean processing (as specified in Section IV below), and soiled linen receiving/sorting area.
- G. All linen items shall be finished/ironed per recognized industry standards, or in accordance with the requirements listed herein.
- H. All linen items shall be returned to the facility in enclosed clean linen carts or wrapped in clear plastic. Clean Linen shall be handled in such a manner as to prevent contamination. Linen items are to be grouped by type, i.e., sheets, pillowcases, patient gowns, O.R. scrubs, bath towels, wash clothes, etc.

IV. LINEN PROCESSING (WASHING) AREA:

- A. The laundry floors, should slope to the drain into properly guarded gray water trenches or floor drains which must be properly maintained to prevent overflow onto the laundry floors.
- B. The walls, floors, work surfaces and ceilings shall be in good repair.
- C. All linen contact surfaces shall be covered with non-absorbent material that is smooth, easily cleanable, and capable of withstanding frequent washing and disinfecting.
- D. This area shall contain or be immediately adjacent to handwashing and separate toilet facilities.
- E. Office areas shall be physically separate from linen processing areas.
- F. The boiler should be of sufficient capacity to provide a constant amount of water at temperatures in excess of 160 degrees F throughout the daily laundry operating period.

- G. The laundry processing area shall be planned, equipped and ventilated so as to prevent the airborne dissemination of contaminants. At no time shall air flow in a direction from the soiled linen processing area. Evidence of proper air flow shall be provided by way of findings of an independent engineering firm.
- H. Lavatories shall have an adequate supply of hot and cold running water regulated with a mixing faucet. A supply of soap and sanitary towels shall be available at all times.
- I. All rafters and overhead surfaces capable of gathering lint and dust should be thoroughly cleaned weekly.
- J. The walls, floors and ceilings shall be in good repair and covered with non-absorbent material that is smooth, easily cleanable and capable of withstanding frequent washing and disinfecting.

V. ILLUMINATION:

- A. The following minimum levels of illumination shall be provided in the laundry:

1.	Sorting and Washing Area	30 Ft. Candles
2.	Flatwork Ironing	50 Ft. Candles
3.	Machine Pressing	70 Ft. Candles
4.	Fine ironing or Sewing	100 Ft. Candles

VI. BILLING SCALES:

Scales used for billing purposes shall be certified annually by necessary certifying agency to ensure correct weight determination. Records of such certification shall be kept on file and available for review.

VII. PERSONNEL POLICIES:

- A. Employees who handle linen shall be required to wear clean clothing or uniforms when on duty. These articles of clothing shall be changed whenever visibly soiled.

- '8. Personnel handling soiled linen shall not be permitted to handle or transport cleaned linen transportation carts or cleaned linen unless they have changed their outer clothing and thoroughly washed their hands. Personnel shall be required to change outer clothing after handling (sorting), soiled linen prior to leaving the area. All personnel shall thoroughly wash their hands after eating, drinking, smoking, using the restroom, or touching any other source of contamination before handling clean linen.
- C. There shall be no eating, drinking, or smoking in the work area.
- D. Continuing education sessions that address new techniques, products, equipment, and infection control policies shall be offered quarterly to all employees who handle linen. Attendance at and content of these sessions will be documented.
- E. Laundry personnel who work the sorting and washing areas, shall be required to comply with health-practices endorsed by CDC, the contracting hospital and local health authorities.

VIII. LAUNDRY CYCLE:

- A. All linen, except for the linen designated "isolation," shall be sorted according to type of washing required prior to processing.
- B. All soiled linen must be weighed prior to loading into washers. No load shall exceed 80 percent of a specified machine's capacity. A log documenting load size shall be maintained.
- C. Carts used to transport soiled linen to washers shall not be used to transport cleaned linen.
- D. The following shall be washed in separate loads: whites, isolation scrub suits, baby linen, colored linen, mops, and linen contaminated with blood.
- E. The laundering process shall ensure that linen is sanitized without staining or causing other damage. The formula shall ensure adequate numbers of flushes to prevent setting of stains. The following shall be provided: An alkali "Break" with a Ph of 11 to 12, suds cycle(s) for at least 10 minutes, and bleach cycle with a total chlorine concentration of 50-100 ppm for 8 minutes. (The program shall ensure that no steam is injected during the bleach cycle.) There

shall be sufficient hot and cold water flushes to remove residual detergent. The final rinse includes a sour and a softener to provide a final pH between 5.5 and 5.0. At a minimum, there should be separate formulas for normal linen, bloody linen, and mops.

- F. Water temperatures shall exceed 160 degrees F for 25 minutes during the wash cycle. It is required that all washers have operable thermometers and that the temperatures be recorded in a log daily.
- G. Wash and rinse cycle temperatures shall be able to be monitored with instrumentation accurate ± 3 degrees F. Such instrumentation should be easily readable and accessible.
- H. The use of a bacteriostat is not required or recommended. The use of toxic products such as pentachlorophenol as a final rinse additive is prohibited.

IX. FINISHING:

- A. Fluff drying shall consist of approximately 20 minutes of drying period in a tumbler with air temperature of 165 degrees F.
- B. Flatwork ironers shall maintain temperatures of at least 300 degrees F at 100 psi pressure. Flatwork ironers shall be equipped with a properly functioning pressure gauge.
- C. During the finishing process, laundry employees shall check for stains and return the **items** to rewash if necessary.
- D. Baby linen shall be wrapped in sealed plastic wrap before being stored or transported.
- E. Clean linen shall be tested for pH at least weekly by the contract laundry management. Loads of linen determined to be outside the accepted pH range shall be relaundered.
- F. Clean linen shall be delivered to the hospital after having been presorted by type of **item**. Operating room scrub suits shall be transported in separate carts or packs.

- G. A billing sheet shall accompany each delivery and shall include the total pounds of cleaned linen being delivered in each transportation cart.
- H. Irreparable damaged/permanently stained linen shall be consolidated and returned to the vendor.
- I. Physician/lab coats shall be returned in a pressed state.

X. STORAGE OF CLEAN LINEN:

- A. Clean linen shall be completely enclosed in appropriately prepared carts in the clean area of the laundry for return within 1 work day.
- B. All laundry items shall be folded and segregated by type.
- C. Cleaned linen shall not remain on the contractor's premises for more than 24 hours.

XI. TRANSPORTATION:

- A. Turn around time between pick-up of soiled linen and delivery of cleaned linen shall not be greater than 48 hours.
- B. Laundry carts used for transportation between the hospital and the laundry facility shall be cleaned with a germicide accepted by the Service Unit Infection Control committee, prior to transporting cleaned linen.

XII. HOUSEKEEPING:

- A. All external laundry equipment surfaces that come in direct contact with soiled linen shall be thoroughly cleaned with a detergent germicide after linen is processed.
- B. The floor of the soiled/receiving/sorting room and cleaned sheet staging area, and any other area which linen may come in contact with shall be smooth, easily cleanable surface, shall be capable of withstanding frequent cleaning with harsh chemicals, and be wet-mopped with a detergent-germicide (accepted by the Infection Control committee) no less than daily. The floors of other areas where linen is handled shall be wet-mopped with a detergent-germicide no less than weekly. Floors may be cleaned with a wet vacuum pick-up system accepted by the Infection Control committee.

- cf. The bins of the receiving/sorting room shall be cleaned with a detergent-germicide daily.
- D. Overhead and hard to reach areas shall be cleaned at such frequency to prevent the accumulation of lint or dust. Such cleaning shall be accomplished with a vacuum cleaner.
- E. Surfaces upon which clean sheets are staged (prior to being inserted into the flatwork ironers) shall be thoroughly cleaned with a non phenolic germicide as often as needed, but not less than every 4 hours.
- F. There shall be no potential for contamination of linen from the storage or use of cleaning supplies or other toxic products.

XIII. QUALITY CONTROL:

- A. The government reserves the right to conduct an inspection in the laundry facilities at any reasonable time.
- B. All product and procedural changes must be reviewed and approved by the Contracting Officer prior to implementation.
- C. Microbial sampling shall be done by and at the discretion of the Contracting Officers Representative.
- D. There shall be on file at the laundry, current copies of quality control tests of the formula. These tests shall be available to the surveyor and shall include at a minimum: temperature checks, detergent titration, chlorine concentration, and pH levels. Where any quality control checks have identified non-compliance, corrections shall be made within 24 hours.
- E. The contractor shall have a prior successful history in providing hospital laundry services.
- F. All plumbing shall be installed to be in compliance with the National Standard Plumbing Code or the Uniform Plumbing Code and maintained in good working order.

- 6. All complaints or potential problems involving laundered products because of contamination during processing' shall be investigated by the contractor. In cases where the problem is not easily resolved, an independent qualified consultant shall be retained at the contractor's expense to resolve the issue.
- H. The contractor shall provide the hospital with annually updated infection control, safety, and , quality assurance policy and procedures. The hospital will review and consult with the contractor on pertinent issues.